Amendment/Reply Transmittal Letter Application No. 10/564,851 Attorney's Docket No. 1034232-000005 Page 2

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\boxtimes	No additional claim fee is required.							
	An additional cl	aim fee is	required, and is	calculated	as shown below:			
			AMENDE	D CLAIMS		,		
	,	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additiona	al Fee	
Total Claims		2	20	0	x \$ 50 (1202)	\$		
Independent Claims		2	3	0	x \$ 200 (1201)			
☐ If Amendment adds multiple dependent claims, add \$ 360 (1203)						\$		
Total Claim Amendment Fee						\$		
☐ Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee								
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT						\$		
	Charge to Deposit Account No. 02-4800 for the fee due. A check in the amount of is enclosed for the fee due. Charge to credit card for the fee due. Form PTO-2038 is attached.							
The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.								
	Respectfully submitted,						٠	
	BUCHANAN INGERSOLL & ROONEY PC							
Date	Date August 13, 2007 By: Fang Liu, Ph.D. Registration No. 51283							